Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number 19866.PCT/FAK DECLARATION FOR First Named inventor Oskar K. Wack **UTILITY OR DESIGN** COMPLETE IF KNOWN PATENT APPLICATION Application Number Filing Date Declaration ☐ Declaration OR Submitted Submitted after **Group Art Unit** with Initial Initial Filing Filina **Examiner Name** As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled : PROCESS FOR CLEANING ARTICLES (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. Lacknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56. I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Certified Copy Attached? Prior Foreign Application Foreign Filing Date **Priority** Country (MM/DOYYYY) Not Claim Number(s) Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/S8/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box   Approved for use through 9/30/98. OMB 0651-0032  Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.  DECLARATION — Utility or Design Patent Application  I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §1120 of any United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §1120 of application and the national or PCT International filing date of this application.												
U.S. Pare	ent Application	<del>,                                     </del>	PCT Parent		Parent Filing Date			ional filin	Parent	Patent Number		
N	lumber		Number		(MM/DD/YYYY)			(If applicable)				
08/705,237			PCT/EP97/01192			03/10/1997 08/30/1996						
	U.S. or PCT Internation											
	As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number  OR  Number Bar Code  Label here											
	Name		Regist Num	Nam					Registration Number			
Francis A. Keegan Peter N. Lalos Michael N. Lau			19,245 19,789 39,479		Alfred A. St		Stad	nicki	30,226			
Additional r	registered practitioner(s	a) named o	n supplemental	Registere	d Prac	itioner I	nfor	nation she	et PTO/	SB/02C att	ached hereto.	
Direct all com	espondence to:		er Number Code Label					OR	<u></u> □ α	rresponde	ence address below	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.  Name of Sole or First Inventor:  A petition has been filed for this unsigned inventor												

Name of Sole or I	First Inventor:		•	☐ v benno	I IIIS DECI	INCO FOR BES	misidiso ma	BILLOR	
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Additional invento	ors are being named o	on thesu	pplemental	Additional 1	nventor(s) s	heet(s) PTO	/SB/02A attac	ched hereto	

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Please type	a plus	sign (+	) inside	this	pax	-	

PTO/SB/02A (3-97)

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## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

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Inventor's Signature							Det	te			
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Post Office Address							_				
City		State			ZIP		a	ountry			

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